

# **PART B - FEE(S) TRANSMITTAL**

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36218 7590 12/05/2007

**KLARQUIST SPARKMAN, LLP**  
**121 S.W. SALMON STREET**  
**SUITE #1600**  
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 I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

<b>Gregory L. Maurer</b>	(Depositor's name)
<i>Gregory L. Maurer</i>	(Signature)
<b>March 4, 2008</b>	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/501,848	07/16/2004	Edward R. Dougherty	4239-64453-2	7131

**TITLE OF INVENTION: SIMULATING MICROARRAYS USING A PARAMETERIZED MODEL**

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1440	\$300	\$0	\$1740	03/05/2008

EXAMINER	ART UNIT	CLASS-SUBCLASS
MARTINELL, JAMES	1634	702-019000

**1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.563).**  
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
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**2. For printing on the patent front page, list**  
 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 3 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 **Klarquist Sparkman, LLP**  
 2  
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**3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)**  
**PLEASE NOTE:** Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

**(A) NAME OF ASSIGNEE** **(B) RESIDENCE: (CITY AND STATE OR COUNTRY)**  
 The Government of the United States of America as represented by the Secretary of the Department of Health and Human Services  
 Rockville, MD  
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 Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☐ Corporation or other private group entity ☒ Government

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☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature *Gregory L. Maurer* Date **March 4, 2008**  
 Typed or printed name **Gregory L. Maurer** Registration No. **43,781**

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